



Construction Education and Training Authority

SUPPLIER APPLICATION FORM

IMPORTANT NOTES: Please read carefully

- To be completed by all vendors seeking registration as an approved supplier
- The questionnaire must be completed in full and be signed
- A company profile may accompany the registration form but will not be accepted as substitute for the application form – all fields on application form MUST be completed by applicant;
- Applicants will be contacted via fax and must therefore submit an operating fax number; failure to comply will result in excluding the supplier from the data base;
- It should be noted that the CETA reserves the right to accept or reject any application without being obliged to give any reasons in this respect;
- Supplier must comply with all the registration-criteria for registration to be finalised – failure to do so may result in the application being declined

SUPPLIER DETAILS

Company / Supplier Name													
Company / Close Corporation Registration Number													
VAT Registration Number (if applicable)													
Income Tax Reference Number													
Web Address													
Email Address													
Telephone Number													
Fax Number (compulsory)													
Toll Free Number													
Number of Full Time Employees													

Postal Address (Compulsory)										Physical Address									
Postal Code																			

Company / Supplier Classification: (please ✓ the relevant box or boxes)								
ISO Listed <input type="checkbox"/>	Importer <input type="checkbox"/>	Services <input type="checkbox"/>	Manufacturer <input type="checkbox"/>	Repairer <input type="checkbox"/>	Black Owned <input type="checkbox"/>	Distributor <input type="checkbox"/>	Exporter <input type="checkbox"/>	Sales <input type="checkbox"/>

Commodities: (Principal business or services of company of supplier)

- (Maximum of 8 commodities will be registered – please ✓ the relevant boxes)
- (Failure to complete this section will result in the application being declined)

1.	Goods & Services
	Printing
	Designing
	Recording
	Pest Control
	Corporate Gifts
	Office Furniture
	Furniture Removal
	Safes and Safe Removal
	Blinds
	Bookshop
	Electrical Repairs
	Catering Services
	Locksmith
	Workshop Facilitation
	Security Services
	Computer Consumables
	Electrical Appliances
	Cleaning Services – Courier Services
	Water Bottle Suppliers
	Document Binding
	Artwork Paintings

2.	Professional Services
	Advertising
	Translation
	Employee Wellness
	Recruitment Services
	Accounting Auditing

SMME Status of your Enterprise

- Please use this table to determine the SMME Status of your Enterprise
- Please ✓ the relevant box in each column

A. Sector	B. Full Time Paid Employees				C. Annual Turnover (millions)				D. Total Gross Asset Value (property excluded) (millions)			
	Med	Small	Very Small	Micro	Med	Small	Very Small	Micro	Med	Small	Very Small	Micro
Agricultural	100	50	10	5	4	2	0.4	0.15	4	2	0.4	0.1
Mining & Quarrying	200	50	20	5	30	7.5	3	0.15	18	4.5	1.8	0.1
Manufacturing	200	50	10	5	40	10	4	0.15	15	3.75	1.5	0.1
Construction	200	50	10	5	20	5	2	0.15	4	1	0.4	0.1
Retail & Motor Trade	100	50	10	5	30	15	3	0.15	5	2.5	0.5	0.1
Wholesale Trade	100	50	10	5	50	25	5	0.15	8	4	0.5	0.1
Catering & Accommodation	100	50	10	5	10	5	1	0.15	2	1	0.2	0.1
Transport & Storage	100	50	10	5	20	10	2	0.15	5	2.5	0.5	0.1
Finance & Business Services	100	50	10	5	20	10	2	0.15	4	2	0.4	0.1
Repair / Allied Services	100	50	10	5	30	15	3	0.15	5	2.5	0.5	0.1
Communications	100	50	10	5	20	10	2	0.15	5	2.5	0.5	0.1
Other Trade	100	50	10	5	10	5	1	0.15	2	1	0.2	0.1
Commercial Agents	100	50	10	5	50	25	5	0.15	8	4	0.5	0.1
Community & Social Services	100	50	10	5	10	5	1	0.15	5	2.5	0.5	0.1
Personal Services	100	50	10	5	10	5	1	0.15	5	2.5	0.5	0.1

SMME Status of your Enterprise

- Please ✓ the relevant box
- According to SMME table
- Compulsory

Micro	
Very Small	
Small	
Medium	
Large	

List all Partners, Proprietors and Shareholders

- Compulsory
- Attach CK1

Name	Position Occupied in the Enterprise	Citizenship	ID Number

NOTE: Where owner are themselves a company or partnership, owners of the holding firm must be identified

HDI Ownership Status

- Failure to complete this section will result in the application being declined

Historically Disadvantaged Individuals (HDI)	%
Women Equity	%
Disabled Individuals	%

Indicate by ticking one of the boxes below should you be interested in providing similar services to any of the CETA Regional Offices located in:

KwaZulu-Natal	<input type="checkbox"/>
Western Cape	<input type="checkbox"/>
Eastern Cape	<input type="checkbox"/>

Gauteng Mpumalanga and North West	<input type="checkbox"/>
Free State and North Cape	<input type="checkbox"/>
Limpopo	<input type="checkbox"/>

Are any of your directors / owners employed by CETA? Please mention also whether your directors / owners / partners are ex-CETA staff member and/or close relatives of your director.

I / we the undersigned acknowledge(s) that:

- The information furnished is true and correct.
- The Equity Ownership claimed is in accordance with the general conditions.
- Any conflict of interests will be declared in the comment space below.

SIGNATURE OF OWNER OR AUTHORISED REPRESENTATIVE	DATE

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Comments / Notes

